

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

FILED DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		2				
5		1				
6						
7						
8						
9						
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16						
17						
18						
19						
20						
21						
22		2				
23		2				
24		2				
25		2				
26		2				
27		2				
28		2				
29		2				
30	1					
31		1				
32		1				
33		1				
34		1				
35		1				
36		1				
37		1				
38		1				
39		1				
40	1					
41						
42						
43						
44	1					
45	1					
46	1					
47	1					
48						
49						
50						
TOTAL IND.	46					
TOTAL DEP.	48					
TOTAL CLAIMS	56					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						